## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



ILORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000100761 (0)

DYNAMIC SOLUTIONS ENGINEERING, INC.

## FILED Apr 07 1998 8:00am Secretary of State

Mailing Address Principal Place of Business 7704 PINE VISTA COURT 7704 PINE VISTA COURT ORLANDO FL 32819 ORLANDO FL 32819 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/24/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3479291 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHWAB, HARRY L 7704 PINE VISTA COURT 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32819 83 City Zip Code 11. Pursuant to the provisions of Sections 607.05:02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointing agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. OFFICERS AND DIRECTORS gistered Agent signature required 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 1111.0 TITLE SCHWAB, HARRY L 1.2 NAME NAME 7704 PINE VISTA COURT STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32819 CITY-\$1-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 City-ST-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change ■ Addition 5 1 TITLE NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** CITY - ST - ZIP 5 4 CITY-ST-ZIP TITLE DELETE Change 6.1 TITLE \_\_\_ Addition NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS** CITY-S1-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the coelever or trusted empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Howell Is Solven

april 3 1998

(407)248-0511